

## ARIZONA STATE BOARD OF HEALTH

## BUREAU OF VITAL STATISTICS

## STANDARD CERTIFICATE OF BIRTH

State File No. 137

Registered No. 113

## 1. PLACE OF BIRTH

County Gila State Arizona  
District or Township Porto Rico Canyon or Village Claypool  
City 7 No. no 6 Ward

(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child Manuela Gomez { If child is not yet named, make supplemental report, as directed.

3. Sex of Child female To be answered ONLY in event of plural births. } 4. Twin, triplet or other. } 5. Legitimate? Yes } 7. Date of birth 3 14 28  
Month Day Year

8. FATHER Full name Manuel Gomez 14. MOTHER Full maiden name Jesus Camargo

9. Residence (Usual place of abode) Chihuahua Mexico 15. Residence (Usual place of abode) Porto Rico  
If non-resident, give place and state. Bayon #6

10. Color or race mexican 11. Age at last birthday 32 (Years) 16. Color or race mexican 17. Age at last birthday (Years)

12. Birthplace (city or place) Mexico 18. Birthplace (city or place) Sausillo  
(State or country) Chihuahua

13. Occupation miner 19. Occupation H W  
Nature of industry

20. Number of children of this mother. 5 (a) Born alive and now living. 00 (b) Born alive but now dead. 00 (c) Stillborn. 00 21. Were precautions taken against ophthalmia neonatorum. yes

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

I hereby certify that I attended the birth of this child, who was alive at 3:15 P.M. on the date above stated.  
(Born alive or stillborn)

\* When there was no attending physician or midwife, then the father, householder, etc. should make this return. A stillborn child is one that neither breathes nor shows other evidence of life after birth.

Signature Isabella de Martinez

Given name added from supplemental report

Month, day, year

Address ClaypoolFiled Mex 20 28 19 6. E. Dora

Registrar.

Registrar.

489-314-136